



Site Monitoring Report of

Utah County Mental Health Services
Wasatch Mental Health

Local Authority Contract #122386

Review Dates: November 17th, 2015; January 5th & 6th, 2016

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Section One: Site Monitoring Report

Executive Summary

In accordance with Utah Code Section 62A-15-103, the Division of Substance Abuse and Mental Health (also referred to in this report as DSAMH or the Division) conducted a review of Utah County Mental Health Services – Wasatch Mental Health (also referred to in this report as WMH or the Center) on November 17th, 2015; January 5th & 6th, 2016. The focus of the review was on governance and oversight, fiscal management, pediatric and adult mental health services, and general operations.

The nature of this examination was to evaluate the Center's compliance with: State policies and procedures incorporated through the contracting process; State mandated mental health services; and Preferred Practice Guidelines. During the examination, the review teams evaluated: the reliability and integrity of the Center's data and its compliance with established programmatic and operational objectives. Additionally, the review included an examination, through sampling, of the Center's efficient and appropriate use of financial resources.

Any program or operational inadequacies are identified in this report as non-compliance issues. The chart on the following page provides a quick reference to locate any non-compliance issues identified by the monitoring team. A detailed description of the issues can be found in the body of this report.

Summary of Findings

Programs Reviewed	Level of Non-Compliance Issues	Number of Findings	Page(s)
<i>Governance and Oversight</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance	None None None	
<i>Child, Youth & Family Mental Health</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance	None None None	
<i>Adult Mental Health</i>	Major Non-Compliance Significant Non-Compliance Minor Non-Compliance	None None None	

Governance and Fiscal Oversight

The Division of Substance Abuse and Mental Health (DSAMH) conducted its annual monitoring review at Utah County Mental Health Services – Wasatch Mental Health (WMH). The Governance and Fiscal Oversight section of the review was conducted on November 17th, 2015 by Chad Carter, Auditor IV. Overall cost per client data was analyzed and compared to the statewide Local Authority average. Personnel and subcontractor files were examined for compliance with state licensing laws and adherence to contractual requirements, as well as the Center's own policy. Client fees were reviewed for consistency and adherence to approved fee schedules. Executive travel reimbursements were reviewed to ensure they were appropriate and that no personal benefit had been gained. Detailed service and operating expenditures were examined for proper approval and supporting documentation.

The CPA firm Litz & Company completed an independent audit of WMH for the year ending June 30th, 2015 and issued a report dated November 10th, 2015; the auditors' opinion was unqualified and did not report any deficiencies or findings. As a part of the review, they also examined specific items at the Division's request, including executive travel, personnel and allowability of costs reported. In the auditor's opinion, these items are accurately presented and no findings or issues were discovered.

Follow-up from Fiscal Year 2015 Audit:

FY15 Deficiencies:

- 1) Documentation was found to be missing in one of the sampled employee files. An employee had declared a potential conflict of interest, but had last completed a conflict of interest form in 2012. The Local Authority Contract requires that conflict of interest forms are completed annually when there is a potential conflict of interest. The Human Resource representative stated that she believed that the conflict of interest still existed.

This deficiency has been resolved.

Findings for Fiscal Year 2016 Audit:

FY16 Major Non-compliance Issues:

None

FY16 Significant Non-compliance Issues:

None

FY16 Minor Non-compliance Issues:

None

FY16 Deficiencies:

None

FY16 Recommendations:

None

FY16 Division Comments:

None

Mental Health Mandated Services

According to Utah Code 17-43-301, the Local Authority is required to provide the following ten mandated services:

Inpatient Care

Residential Care

Outpatient Care

24-hour Emergency Services

Psychotropic Medication Management

Psychosocial Rehabilitation (including vocational training and skills development)

Case Management

Community Supports (including in-home services, housing, family support services, and respite services)

Consultation and Education Services

Services to persons incarcerated in a county jail or other county correctional facility

The mandate to provide services to those in county correctional facilities is not applicable to the children and youth population.

In subsection (4)(a)(ii) each local authority is required to “annually prepare and submit to the Division a plan approved by the county legislative body for mental health funding and service delivery, either directly by the local mental health authority or by contract.” This annual area plan provides the state Division of Substance Abuse and Mental Health with a measuring tool against which the local authority is measured during the annual monitoring site review.

A major focus of the monitoring efforts of the Division of Substance Abuse and Mental Health is to measure compliance with this legislative mandate to provide these services to the adults, youth, and children of Utah.

Child, Youth and Family Mental Health

The Division of Substance Abuse and Mental Health Children, Youth, & Families team conducted its annual monitoring review at Wasatch Mental Health on January 5th & 6th, 2016. The monitoring team consisted of Dinah Weldon, Program Administrator; Eric Tadehara, Program Manager; and Tracy Johnson, Utah Family Coalition (UFC), New Frontiers for Families. The review included the following areas: record reviews, discussions with clinical supervisors and management, case staff, program visits, and feedback from families through questionnaires and a discussion group. During the visit, the monitoring team reviewed the FY15 audit; statistics, including the Mental Health Scorecard; Area Plans; Youth Outcome Questionnaires; family involvement; Family Resource Facilitation (Peer Support); Wraparound to fidelity; Multi-Agency Coordinating Committee; school-based behavioral health; Mental Health Early Intervention funding; civil commitment; compliance with Division Directives; and the Center's provision of the ten mandated services as required by Utah Code 17-43-301.

Follow-up from Fiscal Year 2015 Audit

No findings were issued in FY15.

Findings for Fiscal Year 2016 Audit

FY16 Major Non-compliance Issues:

None

FY16 Significant Non-compliance Issues:

None

FY16 Minor Non-compliance Issues:

None

FY16 Deficiencies:

None

FY16 Recommendations:

- 1) *Juvenile Civil Commitment:* In addition to WMH tracking Juvenile Civil Commitment administratively, WMH also tracks Juvenile Civil Commitment in the youth's Electronic Medical Record (EMR). It is commendable that WMH scans and attaches a) the Commitment of Physical Custody of Child to Local Mental Health Authority Proceeding and b) the Notice of Discharge from Commitment to the Local Mental Health Authority of a Child forms into the EMR. WMH is encouraged to expand this practice to include other Juvenile Civil Commitment forms being added to the EMR.

FY16 Division Comments:

- 1) *Increase in Children Served:* WMH has continued to increase the number of children served throughout the agency. From FY09 to FY15, WMH has served 993 more children, or a 35.7% increase over that time period. This increase reflects open clients reported to the Substance Abuse and Mental Health Information System (SAMHIS) and does not include each of the children, youth, and families who receive Family Resource Facilitation or Peer Support services and are not open clients. WMH provides a continuum of services ranging from mobile crisis services to wraparound services throughout the community, including in individual's homes and in schools. WMH's increase in the number of children, youth, and families served through the continuum of services is commendable.
- 2) *Family Feedback:* Family feedback was collected from 11 questionnaires gathered by the UFC. Multiple parents reported that staff at WMH care about their children and their families and that their opinions are valued. One parent reported "the entire staff at Wasatch really cares about the youth and families that come here, they know our family, and they are thoughtful and want to help."
- 3) *Wraparound & Family Resource Facilitation:* WMH provides Wraparound to fidelity as defined by the UFC. WMH continues to support Family Resource Facilitators (FRF) and the services they provide. At WMH, the FRFs are an integral part of the service delivery system. One family interviewed stated "the FRF and Wraparound saved our lives. Wraparound was a great experience." It is recommended that WMH look for more opportunities to share the strengths, needs, and cultural discovery with clinical staff.

Adult Mental Health

The Division of Substance Abuse and Mental Health Adult Monitoring Team conducted its annual monitoring review at Wasatch Mental Health on January 5th & 6th, 2016. The team consisted of Pam Bennett, Program Administrator, Robert Snarr, Program Administrator, LeAnne Huff, Program Manager, Shanel Long, Justice Services Administrator and Thom Dunford, Program Manager. The review included: record reviews and discussions with clinical supervisors and management teams. During this monitoring visit, site visits were conducted at Recovery Outreach Center (ROC); Intensive Residential Treatment (IRT); Utah County Jail; Wasatch House; community-based housing units and Wasatch Mental Health Administrative Offices. During the site visit, the team reviewed the FY15 Monitoring Report; statistics including the Mental Health Scorecard; area plans; Outcome Questionnaires; Division Directives, and WMH's provision of the ten mandated services as required by Utah Code 17-43-301.

Follow-up from Fiscal Year 2015 Audit

No findings were issued in FY15.

Findings for Fiscal Year 2016 Audit

FY16 Major Non-compliance Issues:

None

FY16 Significant Non-compliance Issues:

None

FY16 Minor Non-compliance Issues:

None

FY15 Deficiencies:

None

FY15 Recommendations:

- 1) *Adult Peer Support Services:* Peer Support Services are an evidence-based social support model. DSAMH encourages WMH to expand the use of their Adult Peer Support Services provided by Certified Peer Support Specialists (CPSS). The recent hire of a part-time Certified Peer Support Specialist should provide opportunities for the growth of this vital program.

FY15 Division Comments:

- 1) *Community Relationships:* DSAMH recognizes and appreciates WMH's efforts to sustain positive collaborative relationships with community partners in Utah County. Multi-Agency

meetings are held weekly with WMH; Provo and Orem Police Departments; Adult Protection and Parole; Food and Care Coalition; Adult Protective Services; Utah Transit Authority and Zoning and Victim Advocates to staff complex clients. WMH and law enforcement work together to provide coordinated care for individuals who are seen by both agencies. In particular, DSAMH is appreciative of efforts by local law enforcement to go to Wasatch House and to meet WMH clientele outside of crisis situations.

- 2) *Justice Reinvestment Initiative:* DSAMH commends WMH for moving forward with JRI planning, including placing two JRI-specific case managers at the Food and Care Coalition and Utah County Jail for coordination of care for discharging individuals.
- 3) *Program Participant Feedback:* Individuals in recovery interviewed by Pam Bennett, Program Administrator, reported that their treatment was helpful overall. They felt that their treatment providers care about their progress (ie. “They listen to me here”). Comments also included “They do a good job here” and “They helped me find a place to live”.
- 4) *Treatment Based and Supported Housing:* DSAMH recognizes and appreciates WMH’s efforts to house individuals who have a history of homelessness and requirements for daily assistance. These individuals are receiving excellent care to remain stable. WMH is commended for efforts to extend housing support by participation in the Cooperative Agreement to Benefit Homeless Individuals (CABHI), in addition to active participation in the community, the Continuum of Care, and the local Public Housing Authorities.
- 5) *Access to Services:* WMH offers walk-in times for initial appointments several times a week. In addition, those requesting services are also offered a choice of three different offices based on their location (Provo, Spanish Fork and American Fork). Individuals without insurance are referred to the Wellness Recovery Center.

Section Two: Report Information

Background

Utah Code Section 62A-15-103 outlines duties of the Division of Substance Abuse and Mental Health. Paragraph (2)(c) states that the Division shall:

- Consult and coordinate with local substance abuse authorities and local mental health authorities regarding programs and services,
- Provide consultation and other assistance to public and private agencies and groups working on substance abuse and mental health issues,
- Receive, distribute, and provide direction over public funds for substance abuse and mental health services,
- Monitor and evaluate programs provided by local substance abuse authorities and mental health authorities,
- Examine expenditures of any local, state and federal funds,
- Monitor the expenditure of public funds by local substance abuse authorities and mental health authorities,
- Contract with local substance abuse authorities and mental health authorities to provide a continuum of services in accordance with division policy, contract provisions, and the local plan,
- Assure that these requirements are met and applied uniformly by local substance abuse authorities and mental health authorities across the state,
- Conduct an annual program audit and review of each local substance abuse authority and mental health authority in the state and its contract provider in a review and determination that public funds allocated to by local substance abuse authorities and mental health authorities are consistent with services rendered and outcomes reported by them or their contract providers,
- Each local substance abuse authority and each mental health authority is exercising sufficient oversight and control over public funds allocated for substance abuse and mental health programs and services, and
- Other items determined by the division to be necessary and appropriate.

Non-Compliance Issues, Action Plans and Timelines

This report is organized into individual sections, in which inadequacies will be identified and discussed. Inadequacies are assigned a level of severity based on the combined judgment of the monitoring team. In order to fully understand the degree of severity, a short discussion of the inadequacy levels follows.

A **major non-compliance issue** is non-compliance in contract requirements which affect the imminent health, safety, or well being of individuals. In cases of non-compliance at this level, a written corrective action plan must be completed by the Local Authority immediately and compliance must be achieved within 24 hours or less.

It should be noted that in extreme cases where, in the professional opinion of the monitoring team, an elevated threat of imminent health, safety, or well being of individuals exists, contract payments may be suspended indefinitely.

A **significant non-compliance issue** is either 1) non-compliance with contract requirements that do not pose an imminent danger to clients but that result in inadequate treatment or care that jeopardizes the well being of individuals; OR 2) non-compliance in required training, paperwork, and/or documentation that are so severe or pervasive as to jeopardize the effectiveness of services and continued contract funding. This type of finding will also require the submission of a written corrective action plan in which the Local Authority identifies the steps it will take to rectify the issue and a time frame for accomplishing the correction. The due date for this submission shall be within 10 working days of receipt of the draft monitoring report by the Local Authority. Compliance must be achieved within 30 days of receipt of the draft monitoring report. Verification of the resolution may be accomplished in several ways including a follow-up visit, measurement during the next site review, a review of training documentation, a review of data submitted subsequent to the correction or a combination of these or any other method determined adequate to measure the resolution.

A **minor non-compliance issue** results when the reviewers identify a performance inadequacy that is relatively small in scope and does not impact client well being or jeopardize funding. This type of finding will require the submission of a written corrective action plan in which the Local Authority identifies the steps it will take to rectify the issue and a time frame for accomplishing the correction. The due date for this submission shall be within 15 working days of receipt of the draft monitoring report by the Local Authority. Compliance must be achieved within 60 days of receipt of the draft monitoring report. Verification of the resolution may be accomplished in several ways including a follow-up visit, measurement during the next site review, a review of training documentation, a review of data submitted subsequent to the correction or a combination of these or any other method determined adequate to measure the resolution.

A **deficiency** results when the contractor is not in full compliance, but the deficiency discovered is not severe enough to require a formal action plan. However, the monitoring team may request action to fix the problem by a given date.

A **recommendation** occurs when the contractor is in compliance. The Division is simply making a best practice or technical suggestion. The contractor is encouraged to implement the suggestion but not required.

In rare instances, a non-compliance issue from a previous year may continue unresolved at the time of the monitoring site visit. A recurring non-compliance issue will be prominently displayed in the current monitoring report and will require special attention by the Local Authority to ensure its immediate resolution.

Signature Page

We appreciate the cooperation afforded the Division monitoring teams by the management, staff and other affiliated personnel of Utah County Mental Health Services – Wasatch Mental Health and for the professional manner in which they participated in this review.

If there are any questions regarding this report please contact Chad Carter at (801)538-4072.

The Division of Substance Abuse and Mental Health

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